

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		75591	STP
O.I.P.E. CLASSIFIER	CG	75590	07/10/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral) ... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
1	Original 1/16/2 1 ✓ ✓ ✓ =
2	2 ✓ ✓
3	3 =
4	4 =
5	5 ✓
6	6 ✓
7	7 ✓ ✓
8	8 O
9	9 ✓
10	10 ✓ ✓
11	11 O =
12	12
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14	14 O
15	15 Y
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17	17 ✓
18	18 O
19	19
20	20 O
21	21 ✓
22	22 =
23	23 ✓
24	24 ✓ ✓
25	25 O =
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27	27 O =
28	28 Y Y
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34	34 ✓ ✓
35	35 O =
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37	37 O =
38	38 Y ✓
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49	49 O
50	50 ✓ = =

Claim	Date
Final	
51	Original 1/16/2 51 = = = 1/2/2
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Claim	Date
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